

City of Long Beach

VIP Suggestion Form



Instructions:

- Use a separate form for each suggestion.
- Type or print legibly in ink.
- Complete all sections. Please be clear and specific.
Include drawings, photos or maps if they will help explain your idea. Attach additional sheets if necessary.
- Sign and submit the form to your Departmental Coordinator.

Suggestor's Name _____ Social Security No _____

Department _____ Work Phone _____

Classification/Title _____

In processing this suggestion, may we disclose your name? ☐ Yes ☐ No

If anonymity is requested, will your title reveal your identity? ☐ Yes ☐ No

The Present Situation:

(Describe the existing method, procedure, and/or situation you hope to improve. Identify the equipment, material, locations, and departments to which your suggestion applies.)

My Suggestion:

(Explain your idea and how it can be accomplished.)

The Benefits:

(Describe the monetary savings and/or other benefits of your suggestion, i.e. time saved per week, job classification involved, improvement of customer service, cost of item, compare present and proposed costs.)

Signature (s) _____ Date _____
(If this is a joint suggestion, it must be signed by both or all suggestors.)

For Department VIP Committee Use Only:

☐ Non-Adopt

☐ Adopt

Award: